DECLARATION & POWER OF ATTORNEY FOR PATENT APPLICATION

My correct residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is obugint to the invention entitled

As a below named inventor, I hereby declare that:

TRAIL MIX TENDERS the specification of which

	rently herewith.	asas	x ca
I hereby state that I have reviewe	if applical) ed and understand the	ble). contents of the above iden	tified specification, including the
claims, as amended by any amen	idment referred to abov	/e.	
I acknowledge the duty to disclose Title 37, Code of Federal Regulat		aterial to the examination of t	his application in accordance with
I hereby claim foreign priority bene inventor's certificate listed below a having a filing date before that of	and have also identified	below any foreign application	foreign application(s) for patent or for patent or inventor's certificate
Prior Foreign Application(s)		Priority Claimed	
(Number)	Country)	(Day/Month/Year Filed)	(Yes) (No)
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:			
60/218,167 (Application Serial No.)	07-14-2000 (Filing Date)	<u>Provisional - Aba</u> (Status-Patented, Pen	
I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and any continuing application and to transact all business in the Patent and Trademark Office connected therewith:			
THOMAS D. WILHELM (REG. NO. 28794) OR ERIC J. LALOR (54,631) Address all telephone calls to: ERIC J. LALOR or TOM WILHELM at telephone number 920-831-0100 Address all correspondence to: THOMAS D. WILHELM using the following Customer Number: 23482			
I hereby declare that all statement information and belief are believe willful false statements and the like 18 of the United States Code and patent issued thereon.	ed to be true; and further e so made are punishab	er that these statements wer ble by fine or imprisonment or	e made with the knowledge that both, under Section 1001 of Title
Full name of sole or first inventor	JEFFREY MICHAEL F	<u>ULBRIGHT</u>	
Inventor's signature Residence Address: 667 Bowen Post Office Address: 667 Bowen	St., Oshkosh, WI 5490	01 01	Date: <u>7-27-04</u> Citizen: <u>USA</u>
Full name of second joint inventor Second Inventor's signature Residence Address: Post Office Address			Date: Citizen: